## ARTS AND CRAFTS CUSTOMER SATISFACTION SURVEY

## **DIRECTIONS:**

Fill in the oval for each attribute that best reflects your opinion on the IMPORTANCE of that attribute and how well the installation PERFORMS on that attribute.

For example, if you think an attribute is "Most Important", fill in the oval in column 5. If an attribute is "Not Important", fill in the oval in column 1. Follow the same scheme for rating PERFORMANCE of the attributes.

Respond to all attributes for which you have an OPINION. If you have no opinion about an attribute, leave the ovals blank. THANK YOU FOR YOUR HELP.

How IMPORTANT to you is this attribute?		How well do you feel your installation PERFORMS in this attribute?		
Not Very Important  Not At All Important  Don't Know  1 2 3 4 5		Outsta	Average Not Very Good  Very Good  Inding	
000000	1. Satisfaction with overall	program	00000	
00000 00000 00000 00000	II. STAFF  2. Staff is helpful 3. Staff is courteous 4. Staff is skilled 5. Staff is knowledgeable 6. Staff is available to instr		00000 00000 00000 00000	
	equipment or technique	S		
000000	7. Facility is attractive, clea 8. Facility is maintained to 9. Facility is maintained to in activities (temperature	instill safety encourage participation e/humidity/ventilation)	000000	
00000	10. Size of facility is sufficiently. PROGRAMS/ACTIVITINEEDS/EXPECTATION	ES MEET YOUR	00000	
000000	11. Sufficient choice of instruction picture framing, woodwo		000000	
00000	12. Sufficient choice of self- (e.g., fiber arts, sewing,	directed arts and crafts	00000	
000000	13. Sufficient choice of spec fairs, and contests	cial events, arts and crafts	000000	
00000	14. Sufficient choice of cust engraving, picture frami		00000	
000000 000000 000000	16. Equipment is clean	ained	000000 000000 000000	

w IMPORTAN	Γ to you is this attribu	ute? H	How well do you feel your installation PERFORMS in this attribute?		
Somewhat Important  Very Important  Very Important  Wost Important  Wost Important  Very Important			Average Very Good  Outstanding  4 3 2 1 0		
00000	) 19. Facility is ope	en during my free tin	ne O	00000	
	DEN	MOGRAPHIC QUE	<u>STIONS</u>		
Gender:	Status:	I currently live:	Time at installation:	Monthly Use of Program:	
O Female	Active Duty	On-Post	C Less than 1 year	4 or more times	
O Male	Family Member	Off-Post	1-3 years	1-3 times	
	<ul><li>Civilian</li><li>Retired</li></ul>		More than 3 years	None	
lease list the	3 services that are m	ost important to y	ou:		
	3 programs that are n				
lease list tile	5 programs that are n	nost important to	you.		
lease list serv	ices or programs you	u would use if the	y were available:		
/hat improven	nents most need to b	e made to Arts an	d Crafts programs, s	ervices, or	

Thank you for your time and effort completing this survey!